

1. Record Nr.	UNINA9910510573503321
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Titolo	Practical Tips in Aortic Surgery : Clinical and Technical Insights / / by John A. Elefteriades, Bulat A. Ziganshin
Pubbl/distr/stampa	Cham : , : Springer International Publishing : , : Imprint : Springer, , 2021
ISBN	3-030-78877-6
Edizione	[1st ed. 2021.]
Descrizione fisica	1 online resource (301 pages)
Collana	Medicine Series
Disciplina	617.412
Soggetti	Internal medicine Surgery Medicine Internal Medicine Clinical Medicine
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Nota di contenuto	Section 1. General Tips -- General Approach -- Cannulation Sites -- Bevel Your Distal Ascending or Hemi-Arch Anastomosis -- Aortic Wrap -- Carbon Dioxide Flooding of the Pericardial Well -- Innominate Vein Ligation -- Pericardial Bridge for Delayed Sternal Closure -- Pull Hard on Graft to Measure Length -- Reduction of Graft Diameter -- Increase of Graft Diameter -- Reinforcement of Posterior Wall of Aortic Anastomosis -- "Retrosternal Sponge" Re-entry Technique -- Reinforced Sternal Closure -- The Tightening Stitch -- Towel Clip Technique to Control Re-entry Bleeding -- Turn Off LV Vent Well Before Finishing Last Ascending Suture Line -- Conduct of DHCA -- Clamping the Aorta -- Other Cerebral Perfusion Strategies -- Swing Venous Line Down to Expose Aortic Root -- Intraoperative Malperfusion -- Surrounding the Ascending Aorta—Without Injuring the PA -- Do NOT obliterate a chronic flap -- Hugging but not Restricting the Innominate Artery with the Clamp -- Do Not Cut Too Close to the Clamp -- Graft Sizing -- "Valerie Stitch" for Exposure of the Aortic Root -- Cannulation of Left Inferior Pulmonary Vein -- Left Atrial Cannulation in Atrial Fibrillation -- The E-Rule: Never Start LA-FA Artery Perfusion w/o the Aorta Clamped -- Remember the Pulmonary Artery for "Venous" Return

-- Mobilize the Posterior Wall Completely -- Mobilize the Descending Aorta from the Esophagus -- Sub-adventitial Hematoma -- Sienna graft for Mega-aorta -- The “Inclusion” Anastomotic Technique -- Big Needle for Thick Aortas -- Aneurysms of the Branches of the Aortic Arch -- Attaching Arch Graft to Ascending Graft (Configurations) -- BioGlue on Graft-to-Graft Anastomoses -- Lung Adhesions -- Adherence of Aneurysm to Chest Wall -- Reoperative Adhesions -- Extracting old prosthetic valves -- Section 2. Ascending Aorta and Aortic Arch -- Aortic Morphology Determines Extent of Resection -- Use the Corner of the Commissure to Advantage -- Aortic Valve Repair -- Ascending Aortic Replacement (*deeper stitches on non-coronary sinus) -- Composite Graft (Aortic Root Replacement) (Bentall Procedure) -- Composite Graft (Aortic Root Replacement) (Bentall Procedure) -- V-Shaped Aortic Root Remodeling -- Valve-Sparing Aortic Root Replacement -- Arch Replacement Options (2-vessel, 3-vessel, trifurcated graft) -- Standard (Non-Frozen) Elephant Trunk Procedure -- Retrieving the Elephant Trunk—Four Options -- Stand-alone Elephant Trunk -- Acute Type A Aortic Dissection -- Ross Procedure -- Section 3. Descending and Thoracoabdominal Aorta -- Descending Aortic Replacement -- Acute Type B Aortic Dissection: Clinical Perspectives to Guide Surgery -- Fenestration Procedure -- Thoracoabdominal Aortic Replacement -- Abdominal aortic replacement -- Visceral artery aneurysms -- Pulmonary Artery Aneurysms -- Section 4. Vascular Rings -- General Comments -- Vascular Rings and Kommeril’s Diverticula. .

Sommario/riassunto

This textbook provides practical tips on the conduct of aortic surgery, from the aortic valve to the iliac arteries. It is organized as a series of Plates, each with a key central illustration, followed by bullet items of accompanying explanatory text. The accompanying text concentrates on specific, critical “do’s and don’ts” that promote and enhance patient safety. Chapters include dozens of color illustrations by one of the nation’s premier medical illustrators, along with selected classic “pen and ink” line drawings. Each central illustration is accompanied by additional secondary figures interspersed at intervals within the accompanying text. Each “practical tip” has an accompanying short (15-30 second) video demonstrating vividly the specific didactic point being made in each Plate. Chapters provide Q&A sections, to promote an interactive feel and experience. The textbook shares practical, potentially life-saving tips—gleaned from over three decades of experience in thousands of aortic operations—regarding virtually every standard operation that arises in aortic surgery. Practical Tips in Aortic Surgery will be an essential resource for surgeons and trainees at all levels of experience: residents and fellows, surgical physician assistants, surgical nurses and technicians, and medical students. The book directly targets two surgical specialties: Cardiac Surgery and Vascular Surgery.